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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani

Secretary of State
DIVISION OF CORPORATIONS

1996

P95000071539 (7)

DOCUMENT # P950000

1. Corporation Name

HARRIS-WOODS ENTERPRISES INC.

Principal Place of Business Mailing Address



2. Principal Place of Business 26 A Nest State Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Zip Country Zip Country Zip Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Zip Country Zip Country Zip Zip Country Zip Zip Suite, Apt. #, etc. City & State Zip Country Zip Country Zip Country Storic Agent Added Added Added Street Address of New Registered Agent WOODS, ROBERT W 13144 BLACK HAWK TRAIL COURT JACKSONVILLE FL 32225	ip Code registered office d agent. I am ORS IN 12
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9. Name and Address of Current Registered Agent WOODS, ROBERT W 13144 BLACK HAWK TRAIL COURT JACKSONVILLE FL 32225 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above named corporation submitts this statement for the purpose of changing its in or registered agent, or both, in the State of Florida Statutes, the above named corporation submitts this statement for the purpose of changing its in or registered agent, or both, in the State of Florida Statutes, the above named corporation submitts this statement for the purpose of changing its in or registered agent, or both, in the State of Florida Statutes SIGNATURE V Superlow type 10 printed success of the obligations of, Section 607,0505. Florida Statutes 12. Of FICERS AND DIRECTIONS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS 14. THEE D DELETE 11. Pursuant to the provisions of Sections 607,0505. Florida Statutes WOODS, ROBERT W 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS 14. City ST-2P JACKSONVILLE FL 32225 14. City ST-2P 15. Street Address (P.O. Box Number is Not Acceptable) 16. Name 16. Value above named corporation submitts this statement for the purpose of changing its in or registered agent, or both, in the State of Florida Statutes 16. Value above named corporation submitts this statement for the purpose of changing its in or registered agent, or both, in the State of Florida Statutes, the above named corporation submitts this statement for the purpose of changing its in or registered agent, or both, in the State of Florida Statutes, the above named corporation submitts this statement for the purpose of changing its in or registered agent, or both, in the State of Florida Statutes, the above named corporation submitts this statement for the purpose of changing its in order to the purpose of changing its in order to the purpose of changing its interest agent agent or registered agent, or both, in the State of Florida Statutes, the above named	registered office d agent. I am ORS IN 12
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, or or an attachment with an address.

SIGNATURE

EN OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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